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APR 3 0 2005

		Application Number	10/017,64	
TRANSMITTAL FORM (to be used for all correspondence after initial filing) Total Number of Pages in This Submission: 23-		Filing Date	December	14, 2001
		First Named Inventor	William R.	Matz
		Art Unit	3629	
		Examiner Name	Jonathan I	P. Ouellette
		Attorney Docket Number	BS01342	BS01342
	EMCI	OSURES		
		il that apply)		
Fee Transmittel Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request (of Research) Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/Incomplate Application Response to Missing Parts under 37 CFR 1.52 or 1.53	☐ Terminal Disclaim ☐ Request for Resun ☐ CD, Number of CL	i to a Provistonal , Revocation pondence Address er d (s)	Appeal C and Inter Appeal C (Appeal Proprieta Status Le Other En RCE	communication to Group Recker, Brief, Reply Brisf) any Information etter aclosure(s) (please Identify below): This is Te-Submish has I Please do Not charge coedit cond
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	Bambi Faivre Walte	NT, ATTORNEY, OR	Reg. No.:	45,197
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Date	April 30, 2005			
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VA 22313-1450 on the date shown below. Name (Print/Type)	Bambi Faivre Walte	rs	Date	April 30, 2005
Signature		Will	3	

Under the Penerwork Reduction Act of 1995, no bersons are required to re	U.S. Patent and Tr	PTO/SE/1' Approved for use through 07/31/2008, OMB adomark Office; U.S. DEPARTMENT OF CO. TWENTY WHICH COME CONTROL WAS A CONTROL OF THE CONTROL OF T	0651-003 DMMERC			
Effective an 12/08/2004.	Complete If Known					
Fees pursuent to the Consolidated Appropriations Act, 2008 (H.R. 4818).	Application Number	10/017.640				
FEE TRANSMITTAL	Filing Date	December 14, 2001				
For FY 2005	First Named Inventor	William R. Matz				
	Examiner Name	Jonathan P. Ouellette				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3629				
TOTAL AMOUNT OF PAYMENT (\$) 1010.00	Attorney Docket No.	B\$01342				
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
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FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH Small Entity Application Type Fee (5) Fee (5) Fee (5)	Small Entity	MINATION FEES Small Entity (3) Fee (3) Fees Paid (S)			
Utility 300 150 500	250 200	100				
Design 200 100 100	50 130	65	_			
Plant 200 100 300	150 160	80				
Reissue 300 150 500	250 600	300				
Provisional 200 100 0	0 \ 0	0				
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims	resposs)	Fee (8) Small Entity Fee (8) 25 200 100 360 180				
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) an Total Sheets Extra Sheets Number of each	id 37 CFR 1.16(s), additional 50 or fractio round up to a whole nur scount)	n themof Fee (\$) Fee Paid Fees Paid Fees Paid	ब <u>ए</u> एक			

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Signature	oti dine	(Attorney/Agent) 45,197	Telephone 757-253-5729
Name (Print/Type)	Bambi Falvre Walters		Date April 30, 2005
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This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, and submitting this completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form sindor suggestions for reducing this burden, should be surit to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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